

Application Data Sheet

**Application Information**

Application Type::	National Stage
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD OF FILLING COMPRESSED- GAS CONTAINERS WITH GAS
Attorney Docket Number::	4033-1002
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	2
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: FRIEDEL  
Middle Name::  
Family Name:: MICHEL  
Name Suffix::  
City of Residence:: ERKRATH  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing MOMMSENSTR. 14  
Address::  
City of Mailing Address:: ERKRATH  
State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: 40699

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GERMANY  
Status:: Full Capacity  
Given Name:: ULRICH  
Middle Name::  
Family Name:: KLEBE  
Name Suffix::  
City of Residence:: KERKEN/ALDEKERK  
State or Province of  
Residence::  
Country of Residence:: GERMANY  
Street of Mailing AM VORSTGRABEN 68  
Address::  
City of Mailing Address:: KERKEN/ALDEKERK

State or Province of Mailing Address::  
Country of Mailing Address:: GERMANY  
Postal or Zip Code of Mailing Address:: 47647

**Correspondence Information**

Correspondence Customer 00466  
Number::

**Representative Information**

Representative Customer Number::	00466
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2004/053405	12/10/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
GERMANY	103 605 91.6	12/19/03	Yes

**Assignment Information**

Assignee Name::  
Street of Mailing  
Address::  
City of Mailing Address::  
State or Province of Mailing Address::  
Country of Mailing Address::  
Postal or Zip Code of Mailing Address::